

**DEADLINE:**

Please return application &  
supplemental questionnaire in  
person or by U.S. Mail with a  
postmark on or before:

**4:30:PM**  
**FRIDAY**  
**MAY 7, 2004**

City-County Employment Office

Your Telephone # \_\_\_\_\_ E-Mail \_\_\_\_\_ Date \_\_\_\_\_

**VETERANS' BENEFIT SPECIALIST (General Assistance Specialist)**

Veterans' Services

**Req. #04-057**

**SUPPLEMENTAL QUESTIONNAIRE**

Name \_\_\_\_\_ Social Security # \_\_\_\_\_

*Please allow 2 weeks from the closing date of this position before expecting  
to receive notice (one way or another) with regards to an interview.*

**PLEASE READ BEFORE COMPLETING:**

**The information** you provide on this form will be used to further evaluate your training and experience as it relates to the position(s) for which you are applying. Be certain to include: paid employment, military history, volunteer experience, and any educational training and/or experience. **NOTE:** Please make certain that all employment history and education mentioned on this supplemental questionnaire also appear on your application. We screen all applications based upon the information **you, the applicant**, provide on these documents only. We do not refer to resumes.

**This questionnaire** is a supplement to your application and is made a part thereof and subject to all terms and conditions noted on the Application for Employment. Remember, you are responsible for the completeness and accuracy of this form as well as the application. Incomplete or omitted information on either of the documents could result in you, the applicant, not receiving full credit for your experience. So please, be as detailed as possible.

**CRIMINAL HISTORY CHECKS WILL BE MADE ON TOP CANDIDATES.**

1. **a)** Please indicate if you served on active duty in the armed forces of the United States during the following:

	<u>YES</u>	<u>DATES</u>		<u>YES</u>	<u>DATES</u>
World War I	___	_____	World War II	___	_____
Korean War	___	_____	Vietnam War	___	_____
Lebanon	___	_____	Grenada	___	_____
Panama	___	_____	Persian Gulf	___	_____

**b)** Did you receive an honorable discharge? YES \_\_\_ NO \_\_\_ (A copy of your DD 214 form must be included with this questionnaire.)

2. **a)** Are you currently a resident of the State of Nebraska? YES \_\_\_ NO \_\_\_

**b)** Have you been a bonafide resident of Nebraska continuously for at least the last five years? YES \_\_\_ NO \_\_\_ (As per state statute must have been a bonafide resident of the state of Nebraska continuously for at least the past five years immediately prior to assuming the position. )

**CONTINUED ON REVERSE**

3. Please indicate if you have college level course work or a degree in the following ("X" all that apply):

	<u>Course Work</u>	<u>AA Degree</u>	<u>BA/S Degree</u>
Psychology	_____	_____	_____
Sociology	_____	_____	_____
Social Work	_____	_____	_____
Counseling	_____	_____	_____
Related field	_____	_____	_____

(Specify \_\_\_\_\_)

4. Do you have experience with regards to program services and/or case management?  
YES \_\_\_\_ NO \_\_\_\_ If yes, please list your employer(s) and describe your experience.

Employer: \_\_\_\_\_ Employer: \_\_\_\_\_

Experience: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Do you have experience in working with veterans' benefits? YES \_\_\_\_ NO \_\_\_\_ If yes, please list your employer(s), how long you performed these duties, and describe your experience.

Employer: \_\_\_\_\_ Employer: \_\_\_\_\_

How long: \_\_\_\_\_ yrs. \_\_\_\_\_ mos. How long: \_\_\_\_\_ yrs. \_\_\_\_\_ mos.

Experience: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**CONTINUED ON REVERSE**

6. Please list any college-level course work or specialized training you have completed or are presently taking that relates to this position:

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7. Do you have knowledge of and/or experience working with computers? YES \_\_\_\_ NO \_\_\_\_  
If yes, please list your employer(s) and describe your experience including types of software used.

Employer: \_\_\_\_\_ Employer: \_\_\_\_\_

Experience: \_\_\_\_\_

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Software: \_\_\_\_\_

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8. Do you have experience conducting interviews? YES \_\_\_\_ NO \_\_\_\_ If yes, please list your employer(s) and describe your experience.

Employer: \_\_\_\_\_ Employer: \_\_\_\_\_

Experience: \_\_\_\_\_

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**CONTINUED ON REVERSE**

9. Do you have experience preparing written correspondence? YES \_\_\_\_ NO \_\_\_\_ If yes, please list your employer(s) and describe your experience including the types of correspondence you prepared.

Employer: \_\_\_\_\_ Employer: \_\_\_\_\_

Experience: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Types of correspondence: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

10. CRIMINAL HISTORY CHECKS will be conducted on the top applicants. In order to perform such checks, the Lincoln the Police Department requires the following information.

***I understand that criminal history checks will be conducted on the candidates and I agree to provide the following information:*** \_\_\_\_\_

(Please initial)

\_\_\_\_\_

Last Name

\_\_\_\_\_

First Name

\_\_\_\_\_

Middle Name

\_\_\_\_\_

Birth date

\_\_\_\_\_

Sex

\_\_\_\_\_

Maiden Name (if applicable)

**IMPORTANT – PLEASE NOTE POLICY BELOW:**

I understand that **ALL convictions** for any law violation (i.e., DUI, shoplifting, minor in possession, reckless driving, etc.) other than a minor traffic violation (i.e., parking ticket, speeding ticket), including convictions that have been “set aside”, “probationed” or “pardoned”, **must be listed on the front of the application form or on an attached sheet.** Consideration is given to the offense and its relationship to the position for which you are applying. **Failure to list convictions will be considered to be falsification of your application and result in automatic rejection.** [Lancaster County Personnel Rules 5.4(c) and Lincoln Municipal Code 2.76.230(d)]

**NOTE: FAILURE TO LIST ALL JOBS AND/OR EDUCATION ON THE APPLICATION COULD BE CAUSE FOR REJECTION BASED ON INSUFFICIENT INFORMATION. A RESUME CANNOT BE USED AS A SUBSTITUTE FOR THE APPLICATION OR THE SUPPLEMENTAL QUESTIONNAIRE. PLEASE CHECK YOUR APPLICATION AGAIN.**